https://www.medicare.gov/supplements-other-insurance/how-medicare-works-with-other-insurance

## How Medicare works with other insurance

If you have Medicare and other health insurance or coverage, each type of coverage is called a "payer." When there's more than one payer, "coordination of benefits" rules decide which one pays first. The "primary payer" pays what it owes on your bills first, and then sends the rest to the "secondary payer" to pay. In some cases, there may also be a third payer.

## What it means to pay primary/secondary

- The insurance that pays first (primary payer) pays up to the limits of its coverage.
- The one that pays second (secondary payer) only pays if there are costs the primary insurer didn't cover.
- The secondary payer (which may be Medicare) may not pay all the uncovered costs.
- If your employer insurance is the secondary payer, you may need to enroll in Medicare Part
  B before your insurance will pay.

If the insurance company doesn't pay the claim promptly (usually within 120 days), your doctor or other provider may bill Medicare. Medicare may make a conditional payment to pay the bill, and then later recover any payments the primary payer should've made.

## How Medicare coordinates with other coverage

If your questions about who pays first, or if your coverage changes, call the Benefits Coordination & Recovery Center (BCRC) at 1-855-798-2627 (TTY: 1-855-797-2627). Tell your doctor and other health care provider about any changes in your insurance or coverage when you get care.

## I have Medicare and:

- o I have Medicaid.
- I'm 65 or older and have group health plan coverage based on my current employment (or the current employment of a spouse of any age), and my employer has 20 or more employees.
- o I'm under 65, entitled to Medicare because I have a disability (other than ESRD), I'm covered by a large group health plan because I or a family member is still working.
- I work for a small company that has a group health plan.
- I have a domestic partner with group health insurance coverage.
- o I have declined or dropped employer-offered coverage.
- o I'm retired, 65 or older and have group health plan coverage from my former employer.
- I'm retired, under 65 and disabled (other than by ESRD), and have group health plan coverage from my former employer.
- o I have COBRA continuation coverage.

- O I'm in a Health Maintenance Organization (HMO) Plan or an employer Preferred Provider Organization (PPO) Plan that pays first. Who pays first if I go outside the employer plan's network?
- o I get health care services from the Indian Health Service.
- I have more than one other type of insurance or coverage.
- o I have TRICARE.
- o I have Veterans' benefits
- o I have ESRD and group health plan coverage.
- I have coverage under the Federal Black Lung Program.
- o I have a claim for no-fault or liability insurance.
- I filed a workers' compensation claim.